

This Form is for INTERNAL PTO USE ONLY
It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 09/618129

Total Fee Calculation

Fee Code	Total Filing Fee	Number of Claims	X	Fee	Fee	Total
Basic Filing Fee	204.00				640	
Total Claims > 30	204.00	36	16	X	288	
Independent Claims > 1	204.00	1	1	X	1	
Mark Dep. Claim Present	204.00				130	
Surcharge	204.00					
English Translation	100					
<u>TOTAL FEE CALCULATION</u>						

Fees due upon filing the application

Total Filing Fees Due = \$ 1168.00

Less Filing Fees Submitted = \$ 00

BALANCE DUE = \$ 1168.00

[Signature]
Office of Initial Patent Examination

Figure 7

PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 29, 1999

Application or Docket Number

01/612129

CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	36 minus 20 =	16
INDEPENDENT CLAIMS	1 minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	37	Minus	36	= 1
	Independent	1	Minus	3	= 2
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

(Column 1)

(Column 2)

(Column 3)

AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total		Minus	37	=
	Independent		Minus	3	=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

(Column 1)

(Column 2)

(Column 3)

AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total		Minus		=
	Independent		Minus		=
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐ OR

OTHER THAN SMALL ENTITY

RATE	FEE
	345.00
X\$ 9=	
X39=	
+130=	
TOTAL	

RATE	FEE
	690.00
X\$18=	285
X78=	
+260=	
TOTAL	775

SMALL ENTITY OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 9=	
X39=	
+130=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	\$2.00
X78=	
+260=	
TOTAL ADDIT. FEE	\$2.00

RATE	ADDITIONAL FEE
X\$ 9=	
X39=	
+130=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X78=	
+260=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$ 9=	
X39=	
+130=	
TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE
X\$18=	
X78=	
+260=	
TOTAL ADDIT. FEE	